Coleraine Grammar School Rowing Club

MEMBERSHIP APPLICATION FORM

Please note: everything disclosed on this form will be held in the strictest confidence.

Full name:	
	Postcode:
Date of Birth:	Yr Group:
Home Tel:	
	Email address
<u>I</u>	Emergency Contact Details
(If applicant is under 18 at	t least one of the contacts given should be their parent/guardian)
Name of 1 st Contact:	Relationship to applicant:
Tel No:	Mobile No:
	Email address
Name of 2 nd Contact:	Relationship to applicant:
Tel No:	Mobile No:
Name of GP	Contact No:
Relevant Medical Information:	
Any known allergies:	
Any medical conditions:	

Any medication being taken:	
Any other special needs or requirements that	would be useful for the coaches to know about:
We require you to inform us of any import changes to their address or contact details	tant changes to your child's health, medication or needs and also of any
medical treatment to be administered who qualified medical practitioner. If I cannot	esponsibility for the above named child, I hereby give permission for ere considered necessary by a nominated First Aider, or by a suitably be contacted and my child should require emergency hospital treatment to provide emergency treatment or medication.
Signed:	Date:
(Paren	nt / Guardian)
Throughout the year there are occasions Coleraine Grammar School Rowing Club	when successes, achievements & other activities involving members of are recognised by the use of photographs & press releases. These are in the local newspapers & on the forthcoming Coleraine Grammar
photographs & press releases by the Rowi contribute to a positive club ethos. However	n policy it is necessary to inform you of this practice. The use of ing Club is intended to acknowledge team & individual achievement & ver, respectful of the right to privacy, I wish to make you aware that the e who have reached the age of sixteen is required for the use of such
	n writing if you, or your son/daughter, have any objections to this. In ool Rowing Club's Child Protection Policy please find below a consent photographs & press releases.
Complete the appropriate section and return	rn with your completed application form.
Parent / Guardian: I give / do not give perm son's/daughter's photograph for the purposes	nission to Coleraine Grammar School Rowing Club to use my as detailed above.
Signed:	Date:
	give permission to Coleraine Grammar School Rowing Club to use my
Signed:	Date:
To be completed by the Parent/Guardian of all j	unior applicants:
I give permission forswim 100m in light clothes.	to participate in rowing activities / regattas and confirm that he/she can
Signed:	(Parent/Guardian)
If you have any issues or queries concerning thi	is form please do not hesitate to contact me email jjohnston360@C2KNI.NET
Or call at the boathouse	
Jeremy Johnston (rowing Coach)	